

Name of Person Filing: _____(1)
Address: _____
City, State, Zip Code: _____
Daytime/Evening Telephone Number: _____ / _____
ATLAS Number (if applicable): _____
Person Filing is: ☐ Self, Without a Lawyer or ☐ Attorney for ☐ Petitioner ☐ Respondent
Attorney Bar Number (if applicable): _____

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

_____(2) **CASE NO. (3)** _____
Petitioner
vs. **REQUEST TO ESTABLISH**
CHILD SUPPORT
_____(2)
Respondent

I am providing support for or have physical custody of the following child(ren):

(4) Name (first, middle, last) Date of Birth

The other party is the natural or adoptive parent of the child(ren) listed above and has a legal duty to provide support pursuant to A.R.S. § 25-501.

(5) Paternity for the above-named minor child(ren) common to the above parties was established by:

- ☐ Court Order from this county or previously transferred to this county. (A.R.S. § 25-502(c))
☐ Affidavit of Acknowledgment filed on or after July 21, 1996 in accordance with A.R.S. § 25-812-814, or § 36-322).
☐ Parties were legally married when child(ren) was (were) born, conceived, or adopted.

WHEREFORE, I request that the court take any or all of the following actions.

- A. Order the other party to pay Guideline Child Support and provide other relief as requested in the attached Parent's Worksheet.
B. Order payment of costs and attorney fees, if appropriate.
C. Order such other relief as deemed necessary and appropriate by the court.

I have read the foregoing document and the facts therein are true and correct to the best of my knowledge.

Do not sign until directed to do so by a Notary Public or a Clerk of the Superior

(6) _____
Requesting Party

STATE OF ARIZONA)
COUNTY OF _____)

Subscribed and sworn or affirmed and acknowledged before me this date _____

by _____
Notary Public or Clerk

My commission expires: _____